BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

83262/N-R

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEO			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			42					RATE	FEE	1 1	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	42 minus 20=		. 22			X\$ 9=		OR	X\$18=	396
INDEPENDENT CLAIMS # minus 3 =					* /	′		X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1186
CLAIMS AS AMENDED - PART II										, ₁₈₀	OTHER	
(Column 1) (Column						(Column 3)		SMALL E	NTITY	OR .	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**	· · · · · · · · · · · · · · · · · · ·	=		X\$ 9=		OR	X\$18=	
AME	independent	*	Minus	***	5 OL A 13 A			X40=		OR	X80=	
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ī	+135=		OR	+270=	
						L	TOTAL			TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)							,	ADDIT. FEE			ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		-		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					ا ا	+135=		OR	+270=		
							L	TOTAL			TOTAL	
		(Column 1)	•	(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	-	=		X\$ 9=	1,500	OR	: X\$18=:	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN.	I CLAIM		ŀ	+135=			. 270	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

BEST AVAILABLE COPY PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

, uplication or Docket Number 09/940195

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	
TOTAL CLAIMS								RATE	FEE	7	RATE	FEE
FOR			NUMBER	NUMBER FILED		BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	
TC)TAL CHARGE	ABLE CLAIMS	L. ini	กนธ์ 20=	*	×		X\$ 9=		OR	X\$18=	
INC	DEPENDENT C	CLAIMS	~ · m	"minus 3 =				X42=		OR	X84=	
ML	JLTIPLE DEPE	NDENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference	e in column 1 is	less than z	ero, enter	r "0" in <i>c</i>	column 2	ı	TOTAL		OR	TOTAL	لىخت ت نسخا
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							- <u>-</u>	SMALL	ENTITY	OR	OTHER SMALL E	
OMENTA	:	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
- :	Total	. 45	Minus	4	0,	3		X\$ 9=		OB	X\$18=	54-
AME	Independent	· /2	Minus	*** Z	<u> </u>	<u> </u>		X42=		OR	X84=	672-
لــا	FIRST PHESE	ENTATION OF MU	JLIIPLE DEF	PNUENT	CLAnvi			+140=		OR	+280=	
			•				L	TOTAL DDIT. FEE		OR A	TOTAL ADDIT. FEE	126
		(Column 1)		(Colum		(Column 3)						
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 47	Minus	** 4	3	= 2		X\$ 9=		OR	X\$18=	3/20
AME	Independent	- / W	Minus	***	Z AIM	=	· [X42=		OR	X84=	1/0800
لـــا	FIRST PHESE	ENTATION OF MU	LIPLE DEF	'ENUEN:	CLAIM			+140=		OR	+280=	
							L Ai	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	/
		(Column 1)		(Colum	nn 2)	(Column 3)		DD11.1				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID E	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ş Q	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent		Minus	***	: 4114	<u> </u>		X42=		OR	X84=	
ت	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM			+140=		OR	+280=	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE									L	TOTAL ADDIT, FEE		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriat box in column 1.												